

**BEST AVAILABLE COPY**

<b>CLAIMS ONLY</b>							SERIAL NO.		FILING DATE	
							APPLICANT(S)			
							<b>CLAIMS</b>			
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	
1	1					51				
2		/				52				
3		/				53				
4		/				54				
5		/				55				
6		/				56				
7		/				57				
8		/				58				
9	/					59				
10		/				60				
11		/				61				
12		/				62				
13		/				63				
14		/				64				
15		/				65				
16		/				66				
17		/				67				
18		/				68				
19		/				69				
20		/				70				
21		/				71				
22		/				72				
23	/					73				
24		/				74				
25		/				75				
26		/				76				
27		/				77				
28	/					78				
29		/				79				
30		/				80				
31		/				81				
32		/				82				
33						83				
34						84				
35						85				
36						86				
37						87				
38						88				
39						89				
40						90				
41						91				
42						92				
43						93				
44						94				
45						95				
46						96				
47						97				
48						98				
49						99				
50						100				
TOTAL IND.	5					TOTAL IND.				
TOTAL DEP.	27					TOTAL DEP.				
TOTAL CLAIMS	32					TOTAL CLAIMS				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS